

REMARKS

Claims 1-18 are pending in this application with claims 1, 2, 4, 5, 9, 11 and 12 being amended and claim 18 added by this response. Claims 1, 2, 4, 5, 9, 11 and 12 are amended to more clearly define the invention. Applicant respectfully submits that no new matter has been added by these amendments. Support for these amendments can be found throughout the specification and original claims, and specifically on page 3, line 21; page 4, lines 24-25; page 6, lines 4-6; and page 8, lines 28-31.

Claim 18 has been added by this response. Applicant respectfully submits that no new matter has been added by the addition of this claim. Support for new claim 18 is found throughout the specification and specifically on page 6, lines 4-12.

I. Information Disclosure Statement

An Information Disclosure Statement pursuant to 37 CFR 1.97 is included herein citing US Patent Application 2001/0031944. This document was incorrectly listed as document number 2002/0031944 A1 in the IDS filed on August 21, 2003. This reference is deemed not to affect the patentability of the claims as amended herein for reasons similar to those presented below.

II. Rejection under 35 U.S.C. 102(e)

Claims 1-15 are rejected under 35 U.S.C. 102(e) as being anticipated by U.S. Patent Application 2002/0038392 – De La Huerga. These claims, as amended, are deemed to be patentable for the reasons given below.

Amended claim 1 provides an information system supporting a plurality of network connected infusion pumps. An acquisition processor acquires fluid infusion related data from a plurality of concurrently operating infusion pumps providing fluid infusion to a corresponding plurality of different patients in different locations. A data processor processes the acquired fluid infusion related data to provide data suitable for presentation in a single display image identifying the plurality of concurrently operating infusion pumps together with status information identifying status of individual pumps of the plurality of concurrently operating infusion pumps. The display image includes a plurality of user selectable elements

associated with the corresponding plurality of concurrently operating infusion pumps. A display processor initiates generation of data representing the single display image and a second image including parameters specific to a particular pump in response to user selection of a displayed element associated with the particular pump. Claim 12 includes features similar to those described above. These features are not shown (or suggested) in De la Huerga.

De la Huerga describes a method and system for managing medicant infusion processes for a patient. De la Huerga repeatedly describes in paragraphs [0201] - [0209] pumps associated with a **single patient** (12, 222) and the concurrent status display of pumps connected to a **single patient** (222 in Figures 27, 28 and 29). Applicant respectfully submits that this is wholly unlike the present claimed invention where a network provides “concurrently operating infusion pumps providing fluid infusion to a corresponding **plurality of different patients in different locations.**” De la Huerga is concerned with multiple IV lines for a single patient getting tangled, separate interfaces for each pump unit for a single patient, mis-medication problems when several IV bags are linked to a single patient via several pump units, and modifying medicant delivery rates when several medicants are simultaneously delivered to a single patient (para. 0011, 0012, 0013 and 0014). De la Huerga provides no teaching or suggestion of a network communication architecture for acquiring information from multiple pumps associated with different patients in different locations, as in the present claimed invention. Instead, De la Huerga teaches a data structure 282, in paragraph 0151, where “patient information 282 MUST be useable to uniquely identify a **SINGLE patient.**” The present claimed invention, on the other hand, addresses the problem where existing pump and medication administration systems fail to support the management of the operation of multiple pumps operating concurrently for “a corresponding plurality of different patients in different locations” within a healthcare enterprise.

Applicant further respectfully submits that De la Huerga in figures 6, 18, 27-29, 35-42 and paragraphs 192-219, neither discloses nor suggests “a single display image” wherein “said single display image includes a plurality of user selectable elements associated with said corresponding plurality of concurrently operating infusion pumps,” as recited in the present claimed invention. Nor do these passages or figures cited in the Office Action disclose or suggest, “a display processor for initiating generation of data representing said single display image and a second image including parameters specific to a particular pump in response to user selection of a displayed element associated with said particular pump” as recited in the present

claimed invention. Rather, the passages and figures relied on merely describe searching pumps to identify pump units associated with the single patient and medicant information currently linked to the single patient. The **single display** described by these figures and passages merely provides the single patient name, time, current medicant delivery status, medicant information identifying the medicant, pump unit status and delivery rate. Nowhere in these passages or elsewhere is there any suggestion or description of “said **single display image** includes a plurality of user selectable elements associated with said corresponding plurality of concurrently operating infusion pumps; and a display processor for initiating generation of data representing said single display image **and a second image** including parameters specific to a particular pump in response to user selection of a displayed element associated with said particular pump” as recited in the present claimed invention. Consequently, withdrawal of the rejection of amended claim 1 under 35 USC 102(e) is respectfully requested.

Dependent claim 2 is considered to be patentable based on its dependence on claim 1. Claim 2 is also considered to be patentable because De la Huerga does not show (or suggest) “said acquisition processor acquires said fluid infusion related data via a network and said acquired fluid infusion related data provides data associated with individual pumps including at least one of, (a) pump location, (b) pump access address, (c) pump start time, (d) pump flow rate, (e) a fluid identifier in a pump and (f) fluid volume dispensed,” as recited in the present claimed invention. As described above with respect to claim 1, De la Huerga provides NO architecture supporting such network communication required for acquiring fluid related data from multiple pumps associated with different patients in different locations and thus cannot acquire the fluid infusion related data via a network and provide data associated with individual pumps in accordance with claim 2.

Dependent claims 3 and 15 were included in the 102(e) rejection. However, as stated on page 6 of the Office Action, De la Huerga does not explicitly state that the “pump access address is an IP address,” as recited in the present claimed invention. Thus, in view of the admissions made in the Office Action, claims 3 and 15 are not anticipated by De la Huerga.

Dependent claim 6 is considered to be patentable based on its dependence on claim 1. Claim 6 is also considered to be patentable because De la Huerga neither discloses nor suggests “said second image includes at least one of, (a) a graphical representation of fluid infusion flow rate and (b) a graphical

representation of infusion fluid volume is delivered,” as recited in the present claimed invention. Nowhere in De la Huerga is there any mention or suggestion of any type of **graphical representation** of any type of data.

Dependent claim 7 is considered to be patentable based on its dependence on claim 1. Claim 7 is also considered to be patentable because De la Huerga neither discloses nor suggests, “said user selectable item supporting user manual entry of a fluid infusion related value initiates generation of a third image enabling at least one of, (a) a user to alter an existing infusion flow rate or fluid volume delivered value and (b) a user to add a new infusion flow rate or fluid volume delivered value,” as recited in the present claimed invention. Contrary to the assertions in the Office Action, paragraph 273 of De la Huerga merely describes a **controller** adjusting the flow rate. Similarly, paragraph 294 of De la Huerga describes the **controller** determining the flow rate after a physician changes a dosage of medication. Nowhere in these passages or elsewhere in De la Huerga is there any description or suggestion of, “said user selectable item supporting **user manual entry** of a fluid infusion related value initiates generation of a third image enabling at least one of, (a) a **user** to alter an existing infusion flow rate or fluid volume delivered value and (b) a **user** to add a new infusion flow rate or fluid volume delivered value,” as recited in the present claimed invention.

Dependent claim 8 is considered to be patentable based on its dependence on claim 1. Claim 8 is also considered to be patentable because De la Huerga neither discloses nor suggests, “an authentication processor for determining a user is authorized to access information concerning an infusion pump and said data processor inhibits presentation of said second image including parameters specific to said particular pump in response to a determination access is unauthorized,” as recited in the present claimed invention. Paragraphs 160-161 and 216 of De la Huerga, cited in the Office Action, merely describe determining whether “the physician is authorized to dispense the medicant to the patient.” If the physician is unauthorized, the processor indicates the unauthorized status. Applicant respectfully submits that this is wholly unlike the present claimed invention where authorization is needed “to access information concerning an infusion pump and said data processor inhibits presentation of said second image including parameters specific to said particular pump in response to a determination access is unauthorized,” as recited in the present claimed invention.” As discussed above regarding claim 1, De la Huerga is concerned with pumps associated with a single patient and the status display of pumps connected to a single patient. De la Huerga is not concerned with concurrently operating

infusion pumps providing fluid infusion to a corresponding plurality of different patients in different locations as in the present claimed invention. Thus, there is no recognition in De la Huerga of the problems associated with restricting access to information for patients based on authorization as a user may only be granted access to view information on certain patients while restricting access to information on other patients. As De la Huerga is only concerned with a single patient, there is no reason or motivation to consider such a feature as claimed in claim 8.

Dependent claim 11 is considered to be patentable based on its dependence on claim 1. Claim 11 is also considered to be patentable because De la Huerga neither discloses nor suggests, “said acquisition processor acquires said fluid infusion related data via a network supporting communication with said plurality of concurrently operating infusion pumps providing fluid infusion to a corresponding plurality of different patients in different locations,” as recited in the present claimed invention. As described above with respect to claim 1, De la Huerga is concerned with having a plurality of infusion pumps attached to a single individual patient. De la Huerga provides no 35 USC 112 enabling disclosure of “concurrently operating infusion pumps providing fluid infusion to a corresponding plurality of **different patients in different locations**,” as recited in the present claimed invention.

Dependent claim 14 is considered to be patentable based on its dependence on claim 1. Claim 14 is also considered to be patentable because De la Huerga neither discloses nor suggests, “said conversion processor converts said retrieved fluid infusion related data to a data format suitable for presentation in a single display image,” as recited in the present claimed invention. Applicant respectfully submits that De la Huerga provides no 35 USC 112 enabling disclosure of this feature combination.

In view of the above remarks and amendments to the claims, it is respectfully submitted that there is no 35 USC 112 enabling disclosure in De la Huerga that makes the present claimed invention unpatentable. Thus, in view of the above remarks, it is respectfully submitted that claims 1 and 12 are not anticipated by De la Huerga. As claims 2, 4 -11 are dependent on claim 1 and claims 13-14 are dependent on claim 12, respectively, it is respectfully submitted that these claims are also not anticipated by De la Huerga. It is thus further respectfully submitted that this rejection is satisfied and should be withdrawn.

III. Rejection under 35 U.S.C. 103(a)

Claims 3 and 15 are rejected under 35 U.S.C. 103(a) as being obvious over U.S. Patent Application 2002/0038392 – De La Huerga. These claims, as amended, are deemed to be patentable for the reasons given below.

Dependent claims 3 and 15 are considered to be patentable based on their dependence on claim 1. De la Huerga neither discloses nor suggests a network provides “concurrently operating infusion pumps providing fluid infusion to a corresponding **plurality of different patients in different locations**,” as recited in the present claimed invention. De la Huerga is concerned with multiple IV lines for a **single** patient getting tangled, separate interfaces for each pump unit for a **single** patient, mis-medication problems when several IV bags are linked to a **single** patient via several pump units, and modifying medicant delivery rates when several medicants are simultaneously delivered to a **single** patient (para. 0011, 0012, 0013 and 0014). De la Huerga provides no teaching or suggestion of a network communication architecture for acquiring information from multiple pumps associated with different patients in different locations, as in the present claimed invention. Instead, De la Huerga teaches a data structure 282, in paragraph 0151, where “patient information 282 MUST be useable to uniquely identify a **SINGLE** patient.” The present claimed invention, on the other hand, addresses the problem where existing pump and medication administration systems fail to support the management of the operation of multiple pumps operating concurrently for “a corresponding plurality of different patients in different locations” within a healthcare enterprise. Unlike the present claimed invention, De la Huerga is not concerned with management of a healthcare enterprise. Rather, De la Huerga is only concerned with a single patient getting the appropriate multiple medicants. Thus, De la Huerga is neither concerned with nor recognizes the problems associated with management of a healthcare enterprise as in the present claimed invention. Consequently withdrawal of the rejection of claims 3 and 15 under 35 USC 103(a) is respectfully requested.

New claim 18 is dependent on Claim 1 and was added to recite, “said single display image shows said plurality of concurrently operating infusion pumps authorized by, or for patients, under the care of at least one of a physician, nurse, care unit, hospital department, clinic or practice group.” Support for this feature is found on page 6, lines 4-12. Applicant respectfully submits that, in addition to the arguments presented above regarding claim 1, De la Huerga neither discloses nor

suggests any of the features of claim 18.

Having fully addressed the Examiner's rejections, it is believed that, in view of the preceding amendments and remarks, this application stands in condition for allowance. Accordingly then, reconsideration and allowance are respectfully solicited. If, however, the Examiner is of the opinion that such action cannot be taken, the Examiner is invited to contact the applicant's attorney at the phone number below, so that a mutually convenient date and time for a telephonic interview may be scheduled.

Respectfully submitted,



Date: November 7, 2006

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